

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted with
Initial FilingDeclaration Submitted
after Initial Filing
(surcharge (37 CFR 1.16 (e))
required)

Attorney Docket Number 85447.000052

First Named Inventor Daniel Steven Kline

COMPLETE IF KNOWN

Application Number N/A

Filing Date Concurrently herewith

Group Art Unit N/A

Examiner Name N/A

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OVERCOAT APPLICATION PEEL APPARATUS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YYYY)

Additional provisional application
numbers are listed on a supplemental
priority data sheet Patent and
Trademark Office/SB/02B attached
hereto

Please type a plus sign (+) inside this box



PTO/SB/01 (12/97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION - UTILITY OR DESIGN PATENT APPLICATION

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365© of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application

U.S. Patent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet Patent and Trademark Office-SB/02B attached

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

☒ Customer Number OR

☐ Registered practitioner(s) name/registration number listed below



Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet Patent and Trademark Office/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A Petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Daniel Steven	Kline

Inventor's Signature					Date		
Residence: City	Encinitas	State	California	Country	UNITED STATES	Citizenship	US
Post Office Address	355 La Mesa Avenue						
Post Office Address							
City	Encinitas	State	California	ZIP	92024	Country	UNITED STATES

☒ Additional inventors are being named on the Supplemental Additional Inventor(s) sheet(s) Patent and Trademark Office/SB/02A attached hereto

Please type a plus sign (+) inside this box →

+

PTO/SB/02A (3/97)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet Page of			
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])					Family Name or Surname			
James					Mason			
Inventor's Signature							Date	
Residence: City	Webster	State	New York	Country	UNITED STATES	Citizenship	US	
Post Office Address	1189 Gatestone Circle							
Post Office Address								
City	Webster	State	New York	ZIP	14580	Country	UNITED STATES	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])					Family Name or Surname			
Robert John					Rosati			
Inventor's Signature							Date	
Residence: City	Carlsbad	State	California	Country	UNITED STATES	Citizenship	US	
Post Office Address	7749 Palacio Drive							
Post Office Address								
City	Carlsbad	State	California	ZIP	92009	Country	UNITED STATES	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])					Family Name or Surname			
Mark Steven					Janosky			
Inventor's Signature							Date	
Residence: City	Rochester	State	New York	Country	UNITED STATES	Citizenship	US	
Post Office Address	52 Red Cedar Drive							
Post Office Address								
City	Rochester	State	New York	ZIP	14616-1666	Country	UNITED STATES	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])					Family Name or Surname			
James Arthur					Larrabee			
Inventor's Signature							Date	
Residence: City	Rochester	State	New York	Country	UNITED STATES	Citizenship	US	
Post Office Address	214 Long Acre Road							
Post Office Address								
City	Rochester	State	New York	ZIP	14621-1004	Country	UNITED STATES	

Please type a plus sign (+) inside this box →

+

PTO/SB/02A (3/97)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Stephen Paul				Lolacono			
Inventor's Signature						Date	
Residence: City	Hilton	State	New York	Country	UNITED STATES	Citizenship	US
Post Office Address	107 Parkway View						
Post Office Address							
City	Hilton	State	New York	ZIP	14468	Country	UNITED STATES
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Atty. Docket: 85447.000052

ASSIGNMENT

FOR GOOD AND VALUABLE CONSIDERATION, we Daniel Steven Kline, residing at 355 La Mesa Avenue, Encinitas, California 92024; James Mason, residing at 1189 Gatestone Circle, Webster, New York 14580; Robert John Rosati, residing at 7749 Palacio Drive, Carlsbad, California 92009; Mark Steven Janosky, residing at 52 Red Cedar Drive, Rochester, New York 14616-1666; James Arthur Larrabee, residing at 214 Long Acre Road, Rochester, New York 14621-1004; and Steven Paul LoIacono, residing at 107 Parkway View, Hilton, New York 14468; HEREBY ASSIGNS all right, title, and interest worldwide in and to the invention described in the U.S. patent application entitled OVERCOAT APPLICATION PEEL APPARATUS executed on _____, and in and to said U.S. patent application and all applications that may be filed on said invention anywhere in the world, including any and all divisions, reissues, continuations and extensions thereof and in and to any Letters Patent, Inventors' Certificates, Design Registrations, Industrial Models, Utility Models and all other forms of protection that may be granted thereon worldwide to Phogenix Imaging, LLC, a Delaware company, doing business at 16275 Technology Drive, San Diego, California 92127-1815. We request that all Letters Patent, Inventors' Certificates, Design Registrations, Industrial Models, Utility Models and all other forms of protection on said invention be issued to the Assignee, and we agree to cooperate fully in obtaining and enforcing patent protection for said invention, including communicating any facts relating to said invention, signing lawful papers, and at the request and expense of the Assignee, testifying in legal proceedings.

Dated: January ____, 2002

Daniel Steven Kline

State of California)
County of _____)

On January ____, 2002, before me, _____, personally appeared Daniel Steven Kline, personally known to me (or proved on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public

Dated: January ____, 2002

James Mason

STATE OF NEW YORK)
COUNTY OF MONROE)

On this ____ day of January, 2002, before me, the subscriber, personally appeared James Mason, to me known and known to me to be the same person described in the above Assignment, and he duly acknowledged to me that he executed the same.

Notary Public

Dated: January ____, 2002

Robert John Rosati

State of California)
County of _____)

On January ____, 2002, before me, _____, personally appeared Robert John Rosati, personally known to me (or proved on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public

Dated: January __, 2002

Mark Steven Janosky

STATE OF NEW YORK)
COUNTY OF MONROE)

On this ____ day of January, 2002, before me, the subscriber, personally appeared Mark Steven Janosky, to me known and known to me to be the same person described in the above Assignment, and he duly acknowledged to me that he executed the same.

Notary Public

Dated: January __, 2002

James Arthur Larrabee

STATE OF NEW YORK)
COUNTY OF MONROE)

On this ____ day of January, 2002, before me, the subscriber, personally appeared James Arthur Larrabee, to me known and known to me to be the same person described in the above Assignment, and he duly acknowledged to me that he executed the same.

Notary Public

Dated: January __, 2002

Steven Paul Lolacono

STATE OF NEW YORK)
COUNTY OF MONROE)

On this ____ day of January, 2002, before me, the subscriber, personally appeared Steven Paul Lolacono, to me known and known to me to be the same person described in the above Assignment, and he duly acknowledged to me that he executed the same.

Notary Public